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Fill in this information to identify your c	ase:	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example,	Marc First Name	First Name
	your driver's license or passport).	Middle Name	Middle Name
		Hoffman	
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>5</u> <u>2</u> <u>9</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Debtor 1 Marc Hoffman				Case number (if known)			
			About Debto	r 1:	About Debtor 2	! (Spouse Only in a Joint Case):	
4.	and En	nsiness names	✓ I have no	ot used any business names or EINs	s. I have not	used any business names or EINs.	
	(EIN) y	cation Numbers ou have used in t 8 years	Business name		Business name		
		trade names and	Business name		Business name		
	doing b	usiness as names	Business name		Business name		
			EIN —		EIN _		
			EIN		EIN —		
5.	Where	you live			If Debtor 2 lives	s at a different address:	
			286 Anita To		Number Street		
			Apt. 201		rambor choos		
			Antioch	IL 60002			
			City	State ZIP Code	City	State ZIP Code	
			Lake County		County		
			the one abov	ng address is different from ye, fill it in here. Note that the d any notices to you at this ess.	from yours, fill	ailing address is different it in here. Note that the court tices to you at this mailing	
			Number Stre	eet	Number Street		
			P.O. Box		P.O. Box		
			City	State ZIP Code	City	State ZIP Code	
6.		ou are choosing	Check one:		Check one:		
	this dis bankru	strict to file for ptcy	petition,	e last 180 days before filing this I have lived in this district longer any other district.	petition, I h	ast 180 days before filing this have lived in this district longer other district.	
				nother reason. Explain. U.S.C. § 1408.)		ther reason. Explain. S.C. § 1408.)	
P	art 2:	Tell the Court A	bout Your Bar	nkruptcy Case			
7.	Bankru	apter of the uptcy Code you		or a brief description of each, see No (Form 2010)). Also, go to the top of		U.S.C. § 342(b) for Individuals Filing he appropriate box.	
	are cho under	oosing to file	Chapter 7				
			Chapter 1	1			
			Chapter 12	2			
			Chapter 1:	3			

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Deb	otor 1	Marc Hoffman			Case num	nber (if known)	
8.	How yo	you will pay the fee	CC pa	will pay the entire fee when I file my pet ourt for more details about how you may p by with cash, cashier's check, or money or whalf, your attorney may pay with a credit of	ay. Typical rder. If your	ly, if you are pay attorney is subi	ring the fee yourself, you may mitting your payment on your
				need to pay the fee in installments. If yo dividuals to Pay Your Filing Fee in Installr			and attach the Application for
			By th fe	equest that my fee be waived (You may alw, a judge may, but is not required to, an 150% of the official poverty line that age in installments). If you choose this option of the Waived (Official Form 103B) and	waive your to polies to you mus	fee, and may do ur family size an at fill out the App	so only if your income is less d you are unable to pay the
		ve you filed for	☑ N	0			
	bankru last 8 y	iptcy within the /ears?	☐ Ye	9 \$.			
			District		When		Case number
			-				
			District		When	MM / DD / YYYY	Case number
			District		When		Case number
40	•					MM / DD / YYYY	
10.		y bankruptcy pending or being	✓ N				
	-	y a spouse who is ng this case with	☐ Ye				
		by a business	Debtor			Relationsh	ip to you
	partnei affiliate	r, or by an	District		When		Case number,
	ammate					MM / DD / YYYY	it known
			Debtor			Relationsh	ip to you
			District		When	MM / DD / YYYY	Case number,if known
11.	Do you resider	ı rent your nce?	☑ N	 Go to line 12. Has your landlord obtained an eviction residence? No. Go to line 12. Yes. Fill out Initial Statement A and file it with this bankruptcy of the statement of the	bout an Evi		

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Deb	tor 1	Marc Hoffman				Case number (i	f known)		
Pa	art 3:	Report About Ar	ıy Bı	ısine	sses You Own as a	a Sole Proprietor			
12.	-	a sole proprietor ull- or part-time ss?			Go to Part 4. Name and location of b	usiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or				Name of business, if any Number Street				
	sole pro	ave more than one prietorship, use a			City		State	ZIP Co	de
	separate sheet and attach it to this petition.				Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above				
13.	3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?		can mos	set ap st rece	opropriate deadlines. If you	the court must know whether you indicate that you are a small nent of operations, cash-flow state that you are a small nent of operations, cash-flow the procedure in a	I business de tement, and	ebtor, you federal in	must attach your come tax return
	ucotor.			No.	I am not filing under Cl	hapter 11.			
		efinition of small s debtor, see		No.	I am filing under Chapt the Bankruptcy Code.	ter 11, but I am NOT a small bus	siness debtor	accordin	g to the definition in
	11 U.S.	C. § 101(51D).		Yes.	I am filing under Chapt Bankruptcy Code.	filing under Chapter 11 and I am a small business debtor according to the definition in the cruptcy Code.			
Pa	art 4:	Report If You Ov	vn o	r Hav	e Any Hazardous F	Property or Any Property	That Nee	ds Imm	ediate Attention
14.	propert alleged immine	own or have any y that poses or is to pose a threat of nt and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?				If immediate attention	is needed, why is it needed?			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?					Where is the property?	Number Street			
						City		State	ZIP Code

Debtor 1	Marc Hoffman	Case number (if known)	

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:				
☐ Incapacity.	I have a mental illness or a ment			

ncapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Marc Hoffman		Case number (if known)						
P	art 6:	Answer These C	Questi	ons for Reporting Pu	ırpos	ses		
16. What kind of debts do you have?			16a.	•	dual pi	sumer debts? Consumer de rimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."
			16b.	•	-	iness debts? Business deb tment or through the operation		e debts that you incurred to obtain e business or investment.
			16c.	State the type of debts y	ou ow	e that are not consumer or bu	sines	s debts.
17. Are you filing under Chapter 7?				No. I am not filing under	r Chap	oter 7. Go to line 18.		
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution ecured creditors?		•	•	•	-	xempt property is excluded and to distribute to unsecured creditors?
18.		any creditors do iimate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you e your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you se your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	0000	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion

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Debtor 1	Marc Hoffman		Case number (if known)			
Part 7:	Sign Below					
For you		I have examined this petition, and I decand correct.	are under penalty of perjury that the information provided is true			
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
			concealing property, or obtaining money or property by fraud in result in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.			
		X /s/ Marc Hoffman Marc Hoffman, Debtor 1	X Signature of Debtor 2			
		Executed on 01/24/2017	Executed on			

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1	Marc Hoffman		Case number (if know	n)
represent	not represented by ey, you do not need	I, the attorney for the debtor(s) named in this petitic eligibility to proceed under Chapter 7, 11, 12, or 13 relief available under each chapter for which the pethe debtor(s) the notice required by 11 U.S.C. § 34 certify that I have no knowledge after an inquiry that is incorrect.	of title 11, United Sta erson is eligible. I also 2(b) and, in a case in	tes Code, and have explained the concertify that I have delivered to which § 707(b)(4)(D) applies,
		X /s/ Robert J. Adams & Associates Signature of Attorney for Debtor	Date	01/24/2017 MM / DD / YYYY
		Robert J. Adams & Associates Printed name		
		Robert J. Adams & Associates Firm Name		
		901 W. Jackson, Suite 202 Number Street		
		Chicago City	IL State	60603 ZIP Code
		Contact phone (312) 346-0100	2.0.0	uptcy713@yahoo.com
		0013056	State	_

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Fill in this inf	ormation to ident	ify your case a	and this filing:		
Debtor 1	Marc		Hoffman		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DI	STRICT OF ILLINOIS		
Case number				Charle	if the in the
(if known)				—	if this is an led filing
Official Form	106 A /P				
Official Form Schedule A	"				12/15
the asset in the ca filing together, bo sheet to this form	ategory where you thi th are equally respon . On the top of any a	ink it fits best. Be sible for supplyin dditional pages, w	et an asset only once. If an asset as complete and accurate as a growing correct information. If more write your name and case numbers, Land, or Other Real Es	possible. If two married pe space is needed, attach a per (if known). Answer eve	eople are separate ry question.
1. Do you own	or have any legal or e		n any residence, building, land		
	nere is the property?				
	•	•	f your entries from Part 1, include that number here		\$0.00
Part 2: De	scribe Your Vehic	eles			
-			any vehicles, whether they are lso report it on Schedule G: Exec	_	•
3. Cars, vans, tr	rucks, tractors, sport	utility vehicles, m	notorcycles		
□ No ☑ Yes					
3.1.			n interest in the property?		ms or exemptions. Put the
Make: Model:		Check one. Debtor		amount of any secured cla Creditors Who Have Claim	
Year:		Debtor	2 only	Current value of the	Current value of the
Approximate milea	ge:		1 and Debtor 2 only tone of the debtors and another	entire property?	portion you own?
Other information:		Actions	tone of the deptors and another	\$0.00	\$0.00
Drives a friends it	car but does not o		if this is community property structions)		
			ecreational vehicles, other veh fishing vessels, snowmobiles, m		
✓ No ☐ Yes					
	r value of the portion	•	of your entries from Part 2, include that number here	uding any	\$0.00

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Deb	otor 1	Marc Hoffman Case no	umber (if known)	
Р	art 3:	Describe Your Personal and Household Items		
Do	you owr	or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Examp	nold goods and furnishings les: Major appliances, furniture, linens, china, kitchenware		
	☐ No ☑ Yes	s. Describe 4 Rooms of furnishings over 10 years old, dinning and co and normal household goods	ooking ware, linens,	\$800.00
7.	Electro Examp	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, music collections; electronic devices including cell phones, cameras, media pla		
	□ No ✓ Yes	s. Describe Cell phone, TV, lamps, small applainces		\$500.00
8.		ibles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other stamp, coin, or baseball card collections; other collections, memorabilia, collections	•	
	✓ No ☐ Yes	s. Describe		
9.		nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool table canoes and kayaks; carpentry tools; musical instruments	es, golf clubs, skis;	
	✓ No ☐ Yes	s. Describe		
10.	Firearn Example No	ns les: Pistols, rifles, shotguns, ammunition, and related equipment		
		s. Describe		
11.	•	s les: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
	☐ No ✓ Yes	s. Describe Normal clothes		\$200.00
12.	Jewelr Examp	 y les: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelly, silver 	jewelry, watches, gems,	
	✓ No ☐ Yes	s. Describe		
13.		rm animals les: Dogs, cats, birds, horses		
	✓ No ☐ Yes	s. Describe		
14.	Any ot	ner personal and household items you did not already list, including any health list	aids you	
		s. Give specific prmation		
15.		e dollar value of all of your entries from Part 3, including any entries for pages	you have	\$1,500.00

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Deb	tor 1	Marc Hoffman		Case number (if known)	
P	art 4:	Describe Your Fina	ıncial Assets		
Do	you own	or have any legal or equit	table interest in any of the followin	ng?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.		es: Money you have in your petition	r wallet, in your home, in a safe depo	osit box, and on hand when you file your	
	☐ No ✓ Yes			Cash:	\$1.00
17.		• •	other financial accounts; certificates of other similar institutions. If you have	•	
	□ No ☑ Yes		Institution name:		
	17.	Checking account:	Checking account, Woodfor	est Bank	\$570.93
18.		mutual funds, or publicly es: Bond funds, investment	traded stocks t accounts with brokerage firms, mor	ney market accounts	
	✓ No ☐ Yes	Institut	tion or issuer name:		
19.	-	blicly traded stock and int est in an LLC, partnership	terests in incorporated and uninco p, and joint venture	rporated businesses, including	
	info	. Give specific rmation about n Name	of entity:	% of ownership:	
20.	Govern Negotia	ment and corporate bonds ble instruments include pers	s and other negotiable and non-nersonal checks, cashiers' checks, prorose you cannot transfer to someone be	gotiable instruments nissory notes, and money orders.	
	info	. Give specific rmation about n Issuer	name:		
21.	Retirem	ent or pension accounts	v, Keogh, 401(k), 403(b), thrift saving	s accounts, or other pension or	
	_	. List each count separately. Type of a	account: Institution name:		
22.	Your sha		ou have made so that you may cont	inue service or use from a company ctric, gas, water), telecommunications	
	☑ No □ Yes		Institution name or indivi	dual:	
23.	_		c periodic payment of money to you,	either for life or for a number of years)	
	_	Issuer	name and description:		

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Debt	tor 1 Marc Hoffman	Case number (if known)	
24.	Interests in an education IRA, in an account in a qualified at 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ABLE program, or under a qualified state tuit	ion program.
	No	Compared to file the annual of any interests 44	11.0.0.0.0.004(-)
	Yes		U.S.C. § 521(C)
25.	Trusts, equitable or future interests in property (other than powers exercisable for your benefit	i anything listed in line 1), and rights or	
	☑ No		
	Yes. Give specific information about them		
26.	Patents, copyrights, trademarks, trade secrets, and other in Examples: Internet domain names, websites, proceeds from re		
	☑ No		
	Yes. Give specific information about them		
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative a	association holdings, liquor licenses, profession	al licenses
	☑ No ☐ Yes. Give specific		
	information about them		
Mon	ney or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you		·
	☑ No		
	Yes. Give specific information	1	Federal:
	about them, including whether you already filed the returns	,	State:
	and the tax years	ı	Local:
29.	Family support		
	Examples: Past due or lump sum alimony, spousal support, c	hild support, maintenance, divorce settlement, p	property settlement
	☑ No		
	Yes. Give specific information	Alimony:	
		Maintenance	e:
		Support:	
		Divorce sett	lement:
		Property set	tlement:
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disa compensation, Social Security benefits; unpaid load		
	✓ No✓ Yes. Give specific information		
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings	account (HSA); credit, homeowner's, or renter's	insurance
	No N		
	Yes. Name the insurance company of each policy		
	and list its value Company name:	Beneficiary:	Surrender or refund value:

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Deb	tor 1 Marc Hoffman	Case number (if known)	
32.	Any interest in property that is due you from someone who has di If you are the beneficiary of a living trust, expect proceeds from a life i entitled to receive property because someone has died		
	✓ No☐ Yes. Give specific information	_	
33.	Claims against third parties, whether or not you have filed a lawsu <i>Examples:</i> Accidents, employment disputes, insurance claims, or righ		
	✓ No ☐ Yes. Describe each claim	_	
34.	Other contingent and unliquidated claims of every nature, includir rights to set off claims	g counterclaims of the debtor and	
	✓ No ☐ Yes. Describe each claim	_	
35.	Any financial assets you did not already list		
	✓ No☐ Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, including an attached for Part 4. Write that number here		\$571.93
Pa	art 5: Describe Any Business-Related Property You O	wn or Have an Interest In. List any rea	l estate in Part 1
37.	Do you own or have any legal or equitable interest in any business	s-related property?	
	No. Go to Part 6.		
	Yes. Go to line 38.		
		po i Do	rrent value of the rtion you own? not deduct secured ims or exemptions.
38.	Accounts receivable or commissions you already earned		·
	✓ No ☐ Yes. Describe	_	
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, of desks, chairs, electronic devices	copiers, fax machines, rugs, telephones,	
	✓ No ☐ Yes. Describe		
40.	Machinery, fixtures, equipment, supplies you use in business, and	I tools of your trade	
	✓ No ☐ Yes. Describe		
41.	Inventory		
	✓ No ☐ Yes. Describe	_	
42.	Interests in partnerships or joint ventures		
	✓ No ☐ Yes. Describe Name of entity:	% of ownership:	

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Deb	tor 1	Marc Hoffman	Case number (if known)	
43.	Custon	er lists, mailing lists, or other compilations		
	✓ No ☐ Yes	. Do your lists include personally identifiable information (as define No Yes. Describe	d in 11 U.S.C. § 101(41A))?	
44.	Any bu	siness-related property you did not already list		
	✓ No ☐ Yes	. Give specific information.		
45.		dollar value of all of your entries from Part 5, including any entries d for Part 5. Write that number here		\$0.00
Pa		Describe Any Farm- and Commercial Fishing-Related Portion of the following properties of the propertie	roperty You Own or Have a	n Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commerc	ial fishing-related property?	
	_	Go to Part 7 Go to line 47.		
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a	nimals es: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes			
48.	Crops-	either growing or harvested		
		. Give specific rmation		
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of	trade	
	✓ No ☐ Yes			
50.	Farm a	nd fishing supplies, chemicals, and feed		
	✓ No ☐ Yes	 .		
51.	Any far	m- and commercial fishing-related property you did not already list		
		. Give specific rmation		
52.	Add the attache	dollar value of all of your entries from Part 6, including any entries d for Part 6. Write that number here	for pages you have	\$0.00
Pa	art 7:	Describe All Property You Own or Have an Interest in Ti	nat You Did Not List Above	
53.	-	have other property of any kind you did not already list? es: Season tickets, country club membership		
	✓ No	. Give specific information.		

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Debtor 1	Marc Hoffman	Case nu	umber (if known)		
54. Add t	he dollar value of all of your entries from Part 7. Write	that number here		.	\$0.00
Part 8:	List the Totals of Each Part of this Form				
55. Part 1	1: Total real estate, line 2			-	\$0.00
56. Part 2	2: Total vehicles, line 5	\$0.00			
57. Part 3	3: Total personal and household items, line 15	\$1,500.00			
58. Part 4	1: Total financial assets, line 36	\$571.93			
59. Part 5	5: Total business-related property, line 45	\$0.00			
60. Part 6	6: Total farm- and fishing-related property, line 52	\$0.00			
61. Part 7	7: Total other property not listed, line 54	+\$0.00			
62. Total	personal property. Add lines 56 through 61	\$2,071.93	Copy personal property total	+	\$2,071.93
63. Total	of all property on Schedule A/B. Add line 55 + line 62	·			\$2,071.93

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Fill in this inf	ormation to iden	tifv vour	case:			
Debtor 1			Hoffman			
Debtor 1	Marc First Name	Middle Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	e Last Name			
					IOIS	
United States Bar	ikruptcy Court for the.	NORTHE	RN DISTRICT OF I	LLII	1013	Check if this is an
Case number (if known)						amended filing
Official Form	106C					
Schedule C:	The Property	You Cl	aim as Exemp	ot		04/16
Using the property space is needed, fi	you listed on Schedul	<i>le A/B: Prop</i> s page as m	erty (Official Form 10	6A/B) as your source, list th	responsible for supplying correct information. The property that you claim as exempt. If more essary. On the top of any additional pages,
is to state a specific exempted up to the receive certain be exemption of 100% property is determined.	ic dollar amount as e amount of any app nefits, and tax-exem 6 of fair market value	exempt. Al plicable stat pt retirement e under a la amount, yo	ternatively, you may tutory limit. Some ex nt funds-may be unl aw that limits the exe our exemption would	clai cemp imite mpti	m the full fair market stionssuch as those ed in dollar amount. I	you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the ole statutory amount.
			-			
	exemptions are you	_	•		if your spouse is filing	with you.
لكا	•		kruptcy exemptions.	11 U	.S.C. § 522(b)(3)	
You are o	claiming federal exem	puons. 11 c	J.S.C. § 522(b)(2)			
2. For any prope	erty you list on Sche	dule A/B th	nat you claim as exer	npt,	fill in the information	below.
-	of the property and li lists this property	ne on	Current value of the portion you own		ount of the emption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for th exemption	
Brief description:			¢200 00		\$800.00	725 II CS 5/42 4004/b)
Brief description: 4 Rooms of furn	ishings over 10 ye	ars old.	\$800.00	Ø	100% of fair market	735 ILCS 5/12-1001(b)
	king ware, linens,			Ш	value, up to any	
normal househo	-				applicable statutory	
Line from Schedule	e A/B: 6				limit	
Brief description:			\$500.00	$\overline{\mathbf{V}}$	\$500.00	735 ILCS 5/12-1001(b)
Cell phone, TV, I	amps, small appla	inces			100% of fair market	
Line from Schedule	e A/B: 7				value, up to any applicable statutory limit	
3. Are you claim	ning a homestead ex	emption of	more than \$160,3751	?		
-	_	-			led on or after the date	e of adjustment.)
✓ No Yes. Did No Yes	you acquire the prope	erty covered	d by the exemption wit	hin 1	,215 days before you f	filed this case?

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Debtor 1	Marc Hoffman			Case number	r (if known)	
Part 2:	Additional Page					
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	the portion you exemption you claim		Specific laws that allow exemption	
		Copy the value from Schedule A/B		eck only one box for h exemption		
Brief descrip Normal clo Line from So		\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a), (e)	
Brief descrip Cash Line from So	ption: chedule A/B: 16	<u>\$1.00</u>		\$1.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	
•	ption: account, Woodforest Bank chedule A/B: 17.1	\$570.93		\$570.93 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)	

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E							
ш	ill in this info	ormation to id	entify your case:				
D	ebtor 1	Marc		Hoffman			
		First Name	Middle Name	Last Name			
	ebtor 2						
(5	Spouse, if filing)	First Name	Middle Name	Last Name			
υ	Inited States Bar	nkruptcy Court for	the: NORTHERN D	ISTRICT OF ILLING	ois		
c	Case number					–	
(it	f known)					Check if this i amended filin	
\subseteq	(C : 1 =	4000					3
<u> </u>	fficial Form	106D					
Sc	chedule D:	Creditors \	Who Have Cla	ims Secured b	y Property		12/15
		nd accurate as po	ssible. If two marrie	d neonle are filing to			and the state of
		•	is needed, copy the		t out, number the ent	ries, and attach it to thi	
	the top of any a	additional pages,	is needed, copy the	Additional Page, fill i d case number (if kno	t out, number the ent		
On	Do any credit	additional pages,	is needed, copy the write your name and secured by your propositions to the commit this form the committee the commit the commit this form the commit	Additional Page, fill id case number (if knowerty?	t out, number the ent own).		is form.
On 1.	Do any credit No. Chec	additional pages, fors have claims so	is needed, copy the write your name and secured by your properties this form to the cation below.	Additional Page, fill id case number (if knowerty?	t out, number the ent own).	ries, and attach it to th	is form.

\$0.00

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				1		
Fill in this in	formation to id	entify your c	ase:			
Debtor 1	Marc		Hoffman			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing) First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for	the: NORTHER	N DISTRICT OF ILLINOIS			
Case number (if known)					Check if this is a	an
					amended filing	
Official Form	n 106E/F					
Schedule E	/F: Creditors	Who Have	e Unsecured Claims			12/15
on Schedule A/B Do not include as If more space is to this page. On	: Property (Official ny creditors with p needed, copy the F	Form 106A/B) a artially secured Part you need, fi itional pages, w	acts or unexpired leases that coul and on Schedule G: Executory Co claims that are listed in Schedule III it out, number the entries in the rite your name and case number (secured Claims	ntracts and Unexpire D: Creditors Who H boxes on the left. At	ed Leases (Officia old Claims Secur	I Form 106G). ed by Property.
1. Do any cred	itors have priority	unsecured clair	ns against you?			
	to Part 2.	unscource olan	no agamot you.			
☐ No. Go ✓ Yes.	to Fait 2.					
claim. For ea show both pr more space i	ach claim listed, ide iority and nonpriority	ntify what type of amounts. As m unsecured clair	creditor has more than one priority under the claim it is. If a claim has both prior nuch as possible, list the claims in all ms, fill out the Continuation Page of	ity and nonpriority amo phabetical order acco	ounts, list that clain	m here and or's name. If
(For an expla	anation of each type	of claim, see the	e instructions for this form in the inst	ruction booklet.		
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,		Total claim	Priority amount	Nonpriority amount
2.1				\$72,000.00	\$25,000.00	\$47,000.00
IRS			Last 4 digits of account number			
Priority Creditor's Nar PO Box 7346	me		· ·			
Number Street			When was the debt incurred?		_	
			As of the date you file, the claim	is: Check all that app	ly.	
			Contingent			
Philadelphia City		1 9101 ZIP Code	Unliquidated Disputed			
Who incurred the	e debt? Check or	ne.	Type of PRIORITY unsecured cla	im:		
Debtor 1 only			Domestic support obligations			
Debtor 2 only	Dobtor 2 only		Taxes and certain other debts	, ,	ent	
Debtor 1 and	Debtor ∠ only of the debtors and ar	nother	Claims for death or personal in	jury while you were		
브 &	claim is for a com		intoxicated Other. Specify			
Is the claim subje		mainty debt	LI Striet. Specify			
✓ No						
Yes						

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Debtor 1	Marc Hoffma	ın			Case number (if know	n)	
Part 1:	Your PRIO	RITY	Unsecured C	laims Continuation Page			
After listing any entries on this page, number then previous page.			age, number then	n sequentially from the	Total claim	Priority amount	Nonpriority amount
2.2					\$4,000.00	\$4,000.00	\$0.00
Robert J. A				- Last 4 digits of account number	r		
901 W. Jackson, Suite 202 Number Street				When was the debt incurred?	01/23/2017	<u> </u>	
				- As of the date you file, the clain	n is: Check all that app	ply.	
				Contingent Unliquidated			
Chicago City		State	60603 ZIP Code	- Disputed			
,	ed the debt?	Check	one.	Type of PRIORITY unsecured c	laim:		
At least	2 only 1 and Debtor 2 o one of the debto	ors and		Domestic support obligations Taxes and certain other debte Claims for death or personal intoxicated	s you owe the governm	nent	
_	if this claim is fo n subject to offse		mmunity dept	Other. Specify Attorney fees for this car	88		
✓ No Yes	i aubject to ons	GL!		Attorney rees for this cas	3 6		

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Debtor 1	Marc Hoffman	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	TY Unsecured Claims	
3. Do aı	ny creditors have nonpriority unsecured	d claims against you?	
	No. You have nothing to report in this par Yes	t. Submit this form to the court with your other schedules.	
If a ci	reditor has more than one nonpriority unse of claim it is. Do not list claims already inc	in the alphabetical order of the creditor who holds each claim. Ecured claim, list the creditor separately for each claim. For each claim listed, is cluded in Part 1. If more than one creditor holds a particular claim, list the other unsecured claims, fill out the Continuation Page of Part 2.	
			Total claim
4.1		_	\$250.00
ATT MOE		Last 4 digits of account number	
Nonpriority (Creditor's Name 6416	When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
		─ ☐ Disputed	
CAROL S	STREAM IL 60197 State ZIP Code		
,	rred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
✓ Debto	r 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	r 2 only	that you did not report as priority claims	
	r 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
☐ At leas	st one of the debtors and another	Other. Specify	
☐ Check	k if this claim is for a community debt	CELL PHONE	
Is the clai	m subject to offset?		
☑ No			
Yes			
4.2			* 0 5 00 00
		Last A Patta of account number 2000 000	\$2,500.00
Capital C	One Creditor's Name	Last 4 digits of account number0_ 9_ 6_ 0_	
PO Box 6		When was the debt incurred?	
Number	Street	As of the date you file, the claim is: Check all that apply.	
		_ Contingent	
		☐ Unliquidated ☐ Disputed	
Carol Str			
City	State ZIP Code	Type of NONPRIORITY unsecured claim:	
	rred the debt? Check one.	☐ Student loans	
ست	r 1 only r 2 only	Obligations arising out of a separation agreement or divorce	
	r 1 and Debtor 2 only	that you did not report as priority claims	
	st one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
_	k if this claim is for a community debt		
ш	m subject to offset?	Grount duru	
✓ No	cabjeet to ender.		
☐ Yes			

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Debtor 1 Marc Hoffman	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.3		\$3,400.00
Citifinancial	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 6931	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
The Lakes NV 88901	· _	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Credit Card	
No		
Yes		
		*
4.4	Lord A. Botto of account would be	\$435.00
COMMONWEALTH EDISON Nonpriority Creditor's Name	Last 4 digits of account number	
PO BOX 6111	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
CAROL STREAM IL 60197	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	UTILITY	
Is the claim subject to offset?		
☑ No		
Yes		
4.5		\$321.00
INFINITY HEALTHCARE	Last 4 digits of account number	
Nonpriority Creditor's Name PO BOX 078894	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
MILWAUKEE WI 53278	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Medical Debt	
Is the claim subject to offset? ✓ No		
✓ NO Yes		

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Debtor 1 Marc Hoffman	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$1,300.00
KENOSHA RADIOLOGY	Last 4 digits of account number	
Nonpriority Creditor's Name 10117 74th St # 150	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	□ Contingent □ Unliquidated	
	— ☐ Disputed	
KENOSHA WI 53142 City State ZIP Code	Time of NONDDIODITY impossived eleimi	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Medical Debt	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.7		\$0.00
Northwestern Medical	Last 4 digits of account number	
Nonpriority Creditor's Name Faculty Foundation	When was the debt incurred?	
Number Street 38693 Eagle Way	As of the date you file, the claim is: Check all that apply.	
- Court Lagio Hay	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Chicago IL 60678	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset? No		
Yes		
4.8	Local Additional account ground as a constant of the constant	\$9,100.00
RESURGENCE CAPITAL Nonpriority Creditor's Name	Last 4 digits of account number 2 6 3 1	
1161 LÁKE COOK RD Number Street	When was the debt incurred? As of the date you file, the claim is: Check all that apply.	
SUITE D	Contingent	
	Unliquidated	
DEERFIELD IL 60015	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	CIVIL JUDGEMENT	
Is the claim subject to offset? No		
Yes		

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Debtor 1 Marc Hoffman	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.9		\$600.00
UNITED HOSPITAL SYSTEM INC	Last 4 digits of account number	4000.00
Nonpriority Creditor's Name 3556 7th Avenue	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
	□ Disputed	
KENOSHA WI 53140 City State ZIP Code	— The set NONDRIGHTY are a second also in	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Medical Debt	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.10		\$181.00
VIREO EMERGENCY PHYSICIANS	Last 4 digits of account number	
Nonpriority Creditor's Name 1324 N SHERIDAN RD	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
WALKE OAN II COOCE	Disputed	
WAUKEGAN IL 60085 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Medical Debt	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.11		\$1,500.00
VISTA HEALTH SYSTEM Nonpriority Creditor's Name	Last 4 digits of account number	
PO BOX 504316	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
SAINT LOUIS MO 63150	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical Debt	
Is the claim subject to offset?		
✓ No ☐ Yes		

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Debtor 1	Marc Hoffmar	1			Case	e number (if known)
Part 3:	List Others	to Be	Notified Abou	t a Debt That You Alread	y Li	sted
For ex credite debts	ample, if a collector or in Parts 1 or 2, that you listed in	tion ag then li Parts	ency is trying to cost the collection a	ollect from you for a debt you gency here. Similarly, if you h tional creditors here. If you do	owe ave r	ebt that you already listed in Parts 1 or 2. to someone else, list the original more than one creditor for any of the have additional parties to be notified for
AMERICO	LLECT			On which entry in Part 1 or	Part :	2 did you list the original creditor?
Name 1851 S AL	VERNO RD			Line 4.6 of (Check one):		Part 1: Creditors with Priority Unsecured Claims
	Street			<u> </u>		Part 2: Creditors with Nonpriority Unsecured Claims
MANITON City	/OC	WI State	54220 ZIP Code	 Last 4 digits of account num 	nber	
ASC/DEP	T OF EDUCATION	ON		On which entry in Part 1 or	Part :	2 did you list the original creditor?
	KER STREET Street			_ Lineof (Check one): Student Loans		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
UTICA City		NY State	13501 ZIP Code	 Last 4 digits of account num 	nber	
	enmilleer, Leib	sker &	Moore LLC	On which entry in Part 1 or	Part :	2 did you list the original creditor?
P.O.BOX S Number	5463 Street			Line of (Check one): Collecting for -capital one	_	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Chicago City		IL State	60680-5463 ZIP Code	 Last 4 digits of account num 	nber	0 9 6 0
	. CREDIT SERV	ICES		On which entry in Part 1 or	Part :	2 did you list the original creditor?
Name 20 CORPO	ORATE HILLS D	R				Part 1: Creditors with Priority Unsecured Claims
Number	Street			Collecting for -INFINITY - HEALTHCARE		Part 2: Creditors with Nonpriority Unsecured Claims
SAINT CH	ARLES	MO State	63301 ZIP Code	 Last 4 digits of account num 	nber	
CONRAD	NOLL			On which entry in Part 1 or	Part :	2 did you list the original creditor?
	ENCE CAPITAL	LLC		of (Check one):		Part 1: Creditors with Priority Unsecured Claims
	E COOK RD			Attorney for RESURGENCE CAPITAL		Part 2: Creditors with Nonpriority Unsecured Claims
 DEERFIEL	n	IL	60015	 Last 4 digits of account num 	ber	2 6 3 1
City		State	ZIP Code	_		

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Debtor 1	Marc Hoffman			Case number (if known)
Part 3:	List Others to	Be Notified Ab	out a Debt That You Alre	ady Listed Continuation Page
	CT CALLERS		On which entry in Part 1	or Part 2 did you list the original creditor?
Name 501 GREI	EN ST 3RD FLOOR	SUITE 302	Line of (Check or	ne):
Number	Street		Collecting for -COM EI	Part 2: Creditors with Nonpriority Unsecured Claims
			—— Last 4 digits of account r	number
AUGUST A	A GA State			
EOS CCA	1		On which entry in Part 1	or Part 2 did you list the original creditor?
Name PO BOX 9	281008		Line of (Check or	ne):
Number	Street		Collecting for -ATT MOBILITY	Part 2: Creditors with Nonpriority Unsecured Claims
BOSTON	MA	02298	Last 4 digits of account r	number
City	State			
	& HARRIS		On which entry in Part 1	or Part 2 did you list the original creditor?
Name 111 WES	T JACKSON BLVD	SUITE 400	Line 4.7 of (Check or	ne): Part 1: Creditors with Priority Unsecured Claims
Number	Street		<u> </u>	Part 2: Creditors with Nonpriority Unsecured Claims
			—— Last 4 digits of account r	number
CHICAGO) IL State	60604 e ZIP Code		
MID! AND			On well-the control to Boot 4	Port O. I'd and I'd the printed and I'd and
Name	FUNDING		On which entry in Part 1	or Part 2 did you list the original creditor?
2365 NOF	RTHSIDE DRIVE SU Street	ITE 300		ne): Part 1: Creditors with Priority Unsecured Claims
	Sueet		Collecting for -CITI —— FINANCIAL	Part 2: Creditors with Nonpriority Unsecured Claims
_			Last 4 digits of account r	number
SAN DIEC	GO CA State			
,				
	& STEENO		On which entry in Part 1	or Part 2 did you list the original creditor?
	RMAN DRIVE		Lineof (Check or	ne): Part 1: Creditors with Priority Unsecured Claims
Number SUITE 25	Street 0		Attorney for -NCO	☐ Part 2: Creditors with Nonpriority Unsecured Claims
			— Last 4 digits of account r	number 1 9 5 9
SAINT LC				
City	State	e ZIP Code		
NCO FIN/ Name	22		On which entry in Part 1	or Part 2 did you list the original creditor?
507 Prude				ne): Part 1: Creditors with Priority Unsecured Claims
Number	Street		OTHER	Part 2: Creditors with Nonpriority Unsecured Claims
	DA	10044	—— Last 4 digits of account r	number
Horsham City	PA State	19044 e ZIP Code		

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Debtor 1	Marc Hoffman		Case number (if known)
Part 3:	List Others to	Be Notified Ab	oout a Debt That You Already Listed Continuation Page
	ADJUSTMENT CO		On which entry in Part 1 or Part 2 did you list the original creditor?
Name 3416 RO	OSEVELT RD.		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		Collecting for -UNITED Part 2: Creditors with Nonpriority Unsecured Claims HOSPITAL SYSTEMS
			Last 4 digits of account number
KENOSH		53142 e ZIP Code	_
City	State	e ZIP Code	
PASI			On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO BOX	188		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		
			Part 2: Creditors with Nonpriority Unsecured Claims
			—— Last 4 digits of account number
BRENTW		37024	
City	State	e ZIP Code	
Transwo	rld Systems		On which entry in Part 1 or Part 2 did you list the original creditor?
Name	•		
Number	st Woodfield Rd. Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Suite 110			Part 2: Creditors with Nonpriority Unsecured Claims
			—— Last 4 digits of account number
Schaumb		60173	<u> </u>
City	State	e ZIP Code	
TRANSW	ORLD SYSTEMS		On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO BOX	15609		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street		
			Collecting for -VIREO Part 2: Creditors with Nonpriority Unsecured Claims EMERGENCY
		40050	Last 4 digits of account number
WILMING City	STON DE State	19850 E ZIP Code	
•			

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Debtor 1	Marc Hoffman	Case number (if known)			
Part 4:	Add the Amounts for Each Type of Unsecured Claim				

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$72,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. +	\$4,000.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$76,000.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
6i. Other.		Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +	\$19,587.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$19,587.00

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Fill in this inf	ormation to ide									
Debtor 1 Marc			Hoffman]						
	First Name	Middle Name	Last Name							
Debtor 2										
(Spouse, if filing)	First Name	Middle Name	Last Name							
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS										
Case number					Check if this is an					
(if known)					amended filing					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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					•	
F	ill in this inf	ormation to i	dentify your case:			
D	ebtor 1	Marc		Hoffman		
		First Name	Middle Name	Last Name		
	ebtor 2					
(S	pouse, if filing)	First Name	Middle Name	Last Name		
U	nited States Bar	nkruptcy Court fo	rthe: NORTHERN D	STRICT OF ILLINOIS		
C	ase number					
_	known)				Check if this is an amended filing	
					amended filing	
<u></u>	<i>c</i> : -: - 1	40011				
	ficial Form					
Sc	hedule H:	Your Code	ebtors			12/1
	e. On the top	_	l Pages, write your na		the left. Attach the Additional Page to this wn). Answer every question. se as a codebtor.)	
2.		•			? (Community property states and territories as, Washington, and Wisconsin.)	
	✓ No. Go t					
	Yes. Did	your spouse, for	mer spouse, or legal ed	quivalent live with you at the tim	ne?	
3.	In Column 1, person show	or if your spouse is filing with you. List the cosigner. Make sure you have listed the F), or Schedule G (Official Form 106G). Use				
	0.4				0.4 0.74 15 4 1	

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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F	ill in this inform	ation to identi	fy your case:					
	Debtor 1	Marc		Hoffman				
	Debior 1	First Name	Middle Name	Last Name			— Che	eck if this is:
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			_	An amended filing
					1 1814	OIC.		A supplement showing postpetition
	United States Bankru	uptcy Court for the	NORTHERN	DISTRICT OF IL	LIN	UIS	-	chapter 13 income as of the following date:
	Case number (if known)				_			MM / DD / YYYY
0	fficial Form 10	6I						MIMI / DD / TTTT
S	chedule I: You	ır Income						12/15
res inc ab yo	sponsible for supply clude information ab out your spouse. If ur name and case no	ing correct inforn out your spouse. more space is ne	nation. If you are If you are separ eded, attach a se Answer every c	e married and not rated and your spo eparate sheet to th	filing ouse	j jointl is not	y, and your filing with y	d Debtor 2), both are equally spouse is living with you, you, do not include information any additional pages, write
1.	Fill in your employ information.	yment		Debtor 1				Debtor 2 or non-filing spouse
	If you have more th							
	job, attach a separa		oyment status	✓ Employed	ام			☐ Employed
	with information ab additional employe	rs.		☐ Not employe	eu			☐ Not employed
			pation	Sales				
	Include part-time, s or self-employed w	·	oyer's name	Mattress Firm	, INC			
	Occupation may in	clude Empl	oyer's address	5815 Gulf Free	way	,		
	student or homema applies.		•	Number Street				Number Street
	аррпез.							<u> </u>
				Houston		TX	77023	
				City		State	Zip Code	City State Zip Code
		How	long employed t	here? <u>4.5 Yea</u>	rs		_	·
F	Part 2: Give D	etails About M	onthly Incom	е				
	timate monthly inco			n. If you have noth	ing t	o repor	t for any line	e, write \$0 in the space. Include your
	3 1			er. combine the info	orma	tion for	all employe	ers for that person on the lines below. If
•	u need more space, a	•					, . , . , .	
						For I	Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross payroll deductions) would be.				2.	_	\$3,752.67	
3.	Estimate and list r	monthly overtime	pay.		3.	+	\$0.00	
4.	Calculate gross in	come. Add line 2	! + line 3.		4.		\$3,752.67	

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Deb	tor 1	Marc Hoffman		Case nun	nber (if knowr	n)	
			_	For Debtor 1	For Debto		
	Сор	y line 4 here	4.	\$3,752.67			
5.		all payroll deductions:		* - >			
		Tax, Medicare, and Social Security deductions	5a.	\$1,089.42			
		Mandatory contributions for retirement plans	5b.	\$0.00			
		Voluntary contributions for retirement plans	5c.	\$0.00			
		Required repayments of retirement fund loans	5d.	<u>\$125.67</u>			
		Insurance	5e.	\$0.00			
	5f.	Domestic support obligations	5f.	\$0.00			
	- 3	Union dues	5g.	\$0.00			
	5h.	Other deductions. Specify:	5h.•	\$0.00			
6.	Add 5g +	the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5h$.	6.	\$1,215.09			
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,537.58			
8.		all other income regularly received:					
	8a.	Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00			
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b.	Interest and dividends	8b.	\$0.00			
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d.	Unemployment compensation	8d.	\$0.00			
	8e.	Social Security	8e.	\$0.00			
	8f.	Other government assistance that you regularly receive					
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
		Specify:	8f.	\$0.00			
	8g.	Pension or retirement income	8g.	\$0.00	<u>-</u>		
	8h.	Other monthly income.					
		Specify: Commisions	8h. .	\$1,500.00			
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$1,500.00			
10.		culate monthly income. Add line 7 + line 9.	10.	\$4,037.58	+		\$4,037.58
11		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	chodi	ulo. I			
11.	 State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. 						er
	Do r	not include any amounts already included in lines 2-10 or amounts tha	t are ı	not available to pay e	expenses liste	ed in Sch	edule J.
	Spe	cify:				11	\$0.00
12.		the amount in the last column of line 10 to the amount in line 11. me. Write that amount on the Summary of Your Assets and Liabilities				12.	\$4,037.58
42		applies.	bio fo	····2			Combined monthly income
13.		you expect an increase or decrease within the year after you file to	115 10	11111 /			
		No. Yes. Explain: None.					

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i	ill in this inform	nation to ider	ntify your case:						
	Debtor 1	Marc		Hoffn	nan	1	ck if this	is: ended filing	
	Debior 1	First Name	Middle Name	Last Na		$\ \ $	A supp	lement showing	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	ame		following	r 13 expenses a ng date:	s or the
	United States Bankı	ruptcy Court for the	ne: NORTHERN	DISTRICT O	F ILLINOIS		MM / D	D / YYYY	<u> </u>
	Case number (if known)						IVIIVI / D	D/1111	
\cap	fficial Form 10)6.I				J			
_	chedule J: Yo		es						12/15
co na	rrect information. I	f more space is	needed, attach and nswer every questi	ther sheet to t	ing together, both a this form. On the to				
1.	Is this a joint cas	e?							
2.	_ No	Debtor 2 live in a s. Debtor 2 must endents?	☐ No ☑ Yes. Fill out this	06J-2, Expense	s for Separate House Dependent's relati Debtor 1 or Debto	ionshi		2. Dependent's age	Does dependent live with you?
	Debtor 2.		for each depend	ent	Daughter			19	□ No
	Do not state the do names.	ependents'							Yes No
3.	Do your expense expenses of peop yourself and you	ole other than	☑ No ☐ Yes						ss
G	Part 2: Estima	ate Your Ong	oing Monthly E	xpenses					
to		of a date after t	he bankruptcy is fi	-	re using this form a supplemental Sche			-	
	clude expenses paid ch assistance and l							Your expens	ses
4.		•	spenses for your re				4	4	\$995.00
	If not included in	line 4:							
	4a. Real estate ta	axes					4	4a	
	4b. Property, hon	neowner's, or ren	ter's insurance				4	4b	
	4c. Home mainte	enance, repair, ar	nd upkeep expenses				4	4c	
	4d. Homeowner's	s association or c	ondominium dues				4	4d.	

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Debtor 1	Marc Hoffman	Case number (if known)	
		Your expense	s
5. Addi	tional mortgage payments for your residence, such as home equity loans	5.	
6. Utilit	ies:		
6a.	Electricity, heat, natural gas	6a	\$175.00
6b.	Water, sewer, garbage collection	6b	
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c	\$275.00
6d.	Other. Specify:	6d	
7. Food	and housekeeping supplies	7.	\$583.00
8. Chile	dcare and children's education costs	8.	
9. Clot	ning, laundry, and dry cleaning	9.	\$150.00
10. Pers	onal care products and services	10.	\$200.00
11. Med	ical and dental expenses	11.	\$175.00
	sportation. Include gas, maintenance, bus or train Do not include car payments.	12.	\$325.00
13. Ente	rtainment, clubs, recreation, newspapers, azines, and books	13.	\$7.58
14. Chai	itable contributions and religious donations	14.	
15. Insu	rance. ot include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance	15a	
15b.	Health insurance	15b.	
15c.	Vehicle insurance	15c.	\$125.00
15d.	Other insurance. Specify:	15d.	
16. Taxe	, , ,	16.	
17. Insta	illment or lease payments:		
17a.	Car payments for Vehicle 1	17a.	
17b.	Car payments for Vehicle 2	17b	
17c.	Other. Specify: Student Loans	17c	\$400.00
17d.	Other. Specify:	17d.	
	payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19. Othe	r payments you make to support others who do not live with you.	19.	

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Deb	tor 1	Marc Hoffman	Case number (if known)				
20.		er real property expenses not included in lines 4 or 5 of this form or on ledule I: Your Income.					
	20a.	Mortgages on other property	20a				
	20b.	Real estate taxes	20b				
	20c.	Property, homeowner's, or renter's insurance	20c				
	20d.	Maintenance, repair, and upkeep expenses	20d				
	20e.	Homeowner's association or condominium dues	20e				
21.	Other	r. Specify:	^{21.} + _				
22.	2. Calculate your monthly expenses.						
	22a.	Add lines 4 through 21.	22a	\$3,410.58			
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b				
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$3,410.58			
23.	Calcu	alculate your monthly net income.					
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$4,037.58			
	23b.	Copy your monthly expenses from line 22c above.	23b. _ _	\$3,410.58			
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$627.00			
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	file this form?				
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
	1	No					
		Yes. Explain here: None.					
		Notice.					

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Fill in this inf	ormation to	identify your case	:	
Debtor 1	Marc		Hoffman	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: NORTHERN D	ISTRICT OF ILLINOI	IS
Case number				
(if known)				
Official Form	106Sum			

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

50.	icalics aren you me your originar forms, you must mil out a new ourinnary and onest the box at the top of this	page.
Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$2,071.93
	1c. Copy line 63, Total of all property on Schedule A/B	\$2,071.93
Р	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$76,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$19,587.00
	Your total liabilities	\$95,587.00
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$4,037.58
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,410.58

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Del	btor 1	Marc Hoffman C	ase number	(if known)	
P	art 4	Answer These Questions for Administrative and Statistica	al Record	s	
6.	Are	you filing for bankruptcy under Chapters 7, 11, or 13?			
		No. You have nothing to report on this part of the form. Check this box and sub Yes	mit this form	ı to the court with you	ir other schedules.
7.	Wha	t kind of debt do you have?			
	_	Your debts are primarily consumer debts. Consumer debts are those "incurre family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistic	•		personal,
		Your debts are not primarily consumer debts. You have nothing to report on this form to the court with your other schedules.	this part of the	he form. Check this I	box and submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$5,833.4				\$5,833.49
9.	Copy	y the following special categories of claims from Part 4, line 6 of Schedule E	E/F:	_	
				Total claim	
	Fron	n Part 4 on Schedule E/F, copy the following:			
	9a.	Domestic support obligations. (Copy line 6a.)	-	\$0.00	<u>_</u>
	9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	-	\$72,000.00	<u></u>
	9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	-	\$0.00	<u></u>
	9d.	Student loans. (Copy line 6f.)	-	\$0.00	<u></u>
		Obligations arising out of a separation agreement or divorce that you did not repriority claims. (Copy line 6g.)	ort as .	\$0.00	_
	Qf	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+	\$0.00	

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

\$72,000.00

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Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Marc		Hoffman	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court fo	or the: NORTHERN D	DISTRICT OF ILLINOIS	
Case number (if known)				☐ Check if this is an
(II KIIOWII)				amended filing
Official Form	106Dec			
		ndividual Debt	or's Schedules	12/15
Sig	ın Below			
Did you pay o	or agree to pay s	someone who is NOT	an attorney to help you fill ou	t bankruptcy forms?
☑ No				
Yes. Na	ame of person			Attach Bankruptcy Petition Preparer's Notice,
				Declaration, and Signature (Official Form 119).
Under penalt true and corr		ciare that I have read	the summary and schedules	filed with this declaration and that they are
X /s/ Marc	Hoffman		Х	
	man, Debtor 1	_	Signature of Debtor 2	

Date <u>01/24/2017</u>

MM / DD / YYYY

MM / DD / YYYY

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Fill in this in	formation to	identify your case			
Debtor 1	Marc		Hoffman		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court f	or the: NORTHERN D	ISTRICT OF ILLINOIS		
Case number					
(if known)				Check if this is an amended filing	
Official Form	107				
Official Forfi	1 107				
Statement of	of Financia	I Affairs for Ind	ividuals Filing fo	or Bankruptcy	04/16
Part 1: Gi	ve Details Ab	oout Your Marital S	Status and Where Yo	u Lived Before	
1. What is your	current marital	status?			
☐ Married					
Not marri	ied				
— 2. During the la	ast 3 vears, have	e vou lived anywhere o	other than where you live	now?	
Zi. Daning the id	iot o yours, nave	you have unywhere e	and than whole you have		
	t all of the places	you lived in the last 3 y	ears. Do not include whe	re you live now.	
_					
(Community		nd territories include Ar	• .	n a community property state or territory? puisiana, Nevada, New Mexico, Puerto Rico, Texas,	
✓ No					
☐ Yes. Mal	ke sure vou fill o	ut Schedule H: Your Co	debtors (Official Form 106	H)	

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Deb	otor 1	Marc Hoffman		Case nur	mber (if known)	
Part 2: Explain the Sources of Yo		Explain the Sources of Y	our Income			
4.	Fill in th	I have any income from employn e total amount of income you rece re filing a joint case and you have i s. Fill in the details.	ived from all jobs and all bus	inesses, including par	t-time activities.	endar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ry 1 of the current year until filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$2,700.00	Wages, commissions, bonuses, tips□ Operating a business	
		calendar year: December 31, 2016) YYYY	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$66,610.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
		ndar year before that: December 31, 2015	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$75,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	
5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalti and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.			vsuits; royalties;			
	List eac	h source and the gross income fro	m each source separately. [Do not include income	that you listed in line 4.	
	✓ No ☐ Yes	. Fill in the details.				

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Debtor 1	Marc Hoffman			Case number (if know	wn)				
Part 3:	List Certain Payment	List Certain Payments You Made Before You Filed for Bankruptcy							
6. Are eit	her Debtor 1's or Debtor 2's	debts primarily consume	er debts?						
□ No		otor 2 has primarily consu primarily for a personal, far			d in 11 U.S.C. § 101(8) as				
	During the 90 days before	you filed for bankruptcy, d	id you pay any credi	tor a total of \$6,425*	or more?				
	No. Go to line 7.								
	total amount you	reditor to whom you paid a paid that creditor. Do not alimony. Also, do not incl	include payments fo	r domestic support ol	oligations, such as				
	* Subject to adjustment on	4/01/19 and every 3 years	s after that for cases	filed on or after the o	date of adjustment.				
✓ Ye	s. Debtor 1 or Debtor 2 or both have primarily consumer debts.								
_	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
	☐ No. Go to line 7.								
		ereditor to whom you paid a include payments for dome ide payments to an attorne Dates of payment	estic support obligation	ons, such as child su					
IRS			\$800.00	\$72,000.00	_ Mortgage				
Creditor's name PO Box 7346 Number Street Philadelphia PA 19101			period		☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☑ Other garnishment				
City	State ZI	P Code Dates of payment	Total amount	Amount you still owe	Was this payment for				
ASC/DEPT	FOF EDUCATION		\$728.00	\$0.00	☐ Mortgage				
	ne KER STREET reet	Per pay po	eriod		Car Credit card Loan repayment				
UTICA		3501			☐ Suppliers or vendors ☐ Other Student Loans				
City	State ZI	P Code							

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Deb	otor 1	Marc Hoffman		Case number (i	f known)	
7.	Insidera corpora agent, i	s include your relatives; an tions of which you are an o	y general partn officer, director, s you operate a	did you make a payment on a debt you owed ar lers; relatives of any general partners; partnerships person in control, or owner of 20% or more of thei as a sole proprietor. 11 U.S.C. § 101. Include pay	of which you r voting secur	are a general partner; ities; and any managing
	✓ No ☐ Yes	s. List all payments to an i	nsider.			
8.		1 year before you filed fo ed an insider?	r bankruptcy,	did you make any payments or transfer any pro	perty on acc	ount of a debt that
	Include	payments on debts guarar	nteed or cosign	ed by an insider.		
	✓ No ☐ Yes	s. List all payments that be	enefited an insid	der.		
P	art 4:	Identify Legal Acti	ons, Repos	sessions, and Foreclosures		
9.	List all	•	sonal injury ca	were you a party in any lawsuit, court action, or ses, small claims actions, divorces, collection suits		•
	✓ No	s. Fill in the details.				
10.	seized,	1 year before you filed fo or levied? all that apply and fill in the		was any of your property repossessed, foreclos	sed, garnishe	ed, attached,
	_	Go to line 11. S. Fill in the information be	low.			
				Describe the property	Date	Value of the property
IRS				Wages _		
	ditor's Nam					
PO Num	Box 73	eet		Explain what happened		
				Property was repossessed.		
				Property was foreclosed.		
Phi	ladelph	ia PA	19101	Property was garnished.		
City		State	ZIP Code	Property was attached, seized, or levied.		
				Describe the property	Date	Value of the property
		OF EDUCATION		Wages —		
	ditor's Nam					
501 Num		KER STREET		Explain what happened		
				Property was repossessed.		
				Property was foreclosed.		
UTI	ICA	NY	13501	Property was garnished.		
Citv		State	ZIP Code	Property was attached, seized, or levied.		

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Deb	otor 1	Marc Hoffman	Case number (if k	nown)	
11.			kruptcy, did any creditor, including a bank or financial in to make a payment because you owed a debt?	stitution, set off any	,
	☑ No □ Yes	s. Fill in the details.			
12.		1 year before you filed for bank rs, a court-appointed receiver, a	ruptcy, was any of your property in the possession of an acustodian, or another official?	assignee for the be	nefit of
	✓ No ☐ Yes	3			
Р	art 5:	List Certain Gifts and C	ontributions		
13.	Within	2 years before you filed for ban	rruptcy, did you give any gifts with a total value of more t	han \$600 per perso	n?
	✓ No ☐ Yes	s. Fill in the details for each gift.			
14.		2 years before you filed for bank charity?	cruptcy, did you give any gifts or contributions with a tota	al value of more tha	n \$600
	✓ No	s. Fill in the details for each gift o	contribution.		
Р	art 6:	List Certain Losses			
15.		1 year before you filed for bank isaster, or gambling?	ruptcy or since you filed for bankruptcy, did you lose any	thing because of th	eft, fire,
	✓ No ☐ Yes	s. Fill in the details.			
Ρ	art 7:	List Certain Payments of	r Transfers		
16.	anyone	you consulted about seeking b	ruptcy, did you or anyone else acting on your behalf pay of ankruptcy or preparing a bankruptcy petition? In preparers, or credit counseling agencies for services require		•
	□ No ☑ Yes	s. Fill in the details.			
	btor CC	√as Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Num	nber Str	eet	_	1/23/17	\$14.95
, van	ibei eti				
City		State ZIP Code	_		
	/w.debt ail or websi	orcc.com te address	_		
Pers	son Who M	lade the Payment, if Not You	_		

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Deb	tor 1	Marc Hoffman	Case number (if known)
17.		1 year before you filed for bankruptcy, did you or anyone else acting or who promised to help you deal with your creditors or to make paymer	
	Do not i	nclude any payment or transfer that you listed on line 16.	
	✓ No ☐ Yes	s. Fill in the details.	
18.		2 years before you filed for bankruptcy, did you sell, trade, or otherwise y transferred in the ordinary course of your business or financial affair	
		both outright transfers and transfers made as security (such as granting of nclude gifts and transfers that you have already listed on this statement.	a security interest or mortgage on your property).
	✓ No ☐ Yes	s. Fill in the details.	
19.		10 years before you filed for bankruptcy, did you transfer any property a beneficiary? (These are often called asset-protection devices.)	to a self-settled trust or similar device of which
	✓ No ☐ Yes	. Fill in the details.	
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	osit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or i closed, sold, moved, or transferred?	nstruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.	of deposit; shares in banks, credit unions, brokerage
	✓ No ☐ Yes	s. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruptc urities, cash, or other valuables?	y, any safe deposit box or other depository
	✓ No ☐ Yes	. Fill in the details.	
22.	-	ou stored property in a storage unit or place other than your home with	in 1 year before you filed for bankruptcy?
	✓ No ☐ Yes	. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone Else	
23.	•	hold or control any property that someone else owns? Include any prin trust for someone.	operty you borrowed from, are storing for,
	✓ No ☐ Yes	. Fill in the details.	

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Deb	btor 1	Marc Hoffman Case number	er (if known)
Р	art 10:	Give Details About Environmental Information	
For	r the purp	ose of Part 10, the following definitions apply:	
	hazardou	nental law means any federal, state, or local statute or regulation concerning pollu is or toxic substance, wastes, or material into the air, land, soil, surface water, gro g statutes or regulations controlling the cleanup of these substances, wastes, or m	undwater, or other medium,
		ns any location, facility, or property as defined under any environmental law, whet or used to own, operate, or utilize it, including disposal sites.	her you now own, operate, or
		us material means anything an environmental law defines as a hazardous waste, he, hazardous material, pollutant, contaminant, or similar item.	azardous substance, toxic
Rep	port all no	otices, releases, and proceedings that you know about, regardless of when they oc	curred.
24.	Has any law?	y governmental unit notified you that you may be liable or potentially liable under o	r in violation of an environmental
	☑ No ☐ Yes	s. Fill in the details.	
25.		ou notified any governmental unit of any release of hazardous material?	
	✓ No ☐ Yes	s. Fill in the details.	
26.	Have you	ou been a party in any judicial or administrative proceeding under any environment	al law? Include settlements and
	☑ No □ Yes	s. Fill in the details.	
Р	art 11:	Give Details About Your Business or Connections to Any Busines	ss
27.	Within 4 busines	4 years before you filed for bankruptcy, did you own a business or have any of the ss?	following connections to any
		A sole proprietor or self-employed in a trade, profession, or other activity, either full-time. A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation	e or part-time
		None of the above applies. Go to Part 12. 5. Check all that apply above and fill in the details below for each business.	
28.		2 years before you filed for bankruptcy, did you give a financial statement to anyon ncial institutions, creditors, or other parties.	e about your business? Include
	□ No □ Yes	s. Fill in the details below.	

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Debtor 1	Marc Hoffman		Case number (if known)
Part 12	: Sign Below		
that answe	ers are true and correct. I und	erstand that making a false statemen ankruptcy case can result in fines up	ments, and I declare under penalty of perjury t, concealing property, or obtaining money or to \$250,000, or imprisonment for up to 20 years,
X /s/ Mai	rc Hoffman	X	
Marc H	offman, Debtor 1	Signature of Debtor 2	
Date _	01/24/2017	Date	<u> </u>
Did you at	tach additional pages to Your	Statement of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
☑ No □ Yes			
Did you pa	ay or agree to pay someone w	no is not an attorney to help you fill o	ut bankruptcy forms?
√ No			
	lame of person		Attach the Bankruptcy Petition Preparer's Notice,

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/Resources/ApprovedCreditAndDebtCounselors.aspx.}{}$

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

ın	re warc Hottman	Case No.
		Chapter <u>13</u>
	DISCLOSURE OF COMPENSATION O	OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in cois as follows:	e petition in bankruptcy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	\$4,000.00
	Prior to the filing of this statement I have received	
	Balance Due	\$4,000.00
2.	. The source of the compensation paid to me was: ☐ Debtor ☐ Other (specify)	
3.	. The source of compensation to be paid to me is:	
	☑ Debtor ☐ Other (specify)	
4.	I have not agreed to share the above-disclosed compensation associates of my law firm.	with any other person unless they are members and
	☐ I have agreed to share the above-disclosed compensation with associates of my law firm. A copy of the agreement, together compensation, is attached.	
5.	. In return for the above-disclosed fee, I have agreed to render legal	service for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice bankruptcy;	to the debtor in determining whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of a	affairs and plan which may be required;
	c. Representation of the debtor at the meeting of creditors and cor	ofirmation hearing, and any adjourned hearings thereof;

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B2030 (Form	2030)	(12/15)
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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/24/2017 /s/ Robert J. Adams & Associates

Date

Robert J. Adams & Associates
Robert J. Adams & Associates
901 W. Jackson, Suite 202

Chicago, IL 60603

Phone: (312) 346-0100 / Fax: (312) 346-6228

Bar No. 0013056

/s/ Marc Hoffman

Marc Hoffman

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Marc Hoffman CASE NO

Debtor

SOCIAL SECURITY NO. xxx-xx-5229

CHAPTER 13

ORDER TO EMPLOYER TO PAY THE TRUSTEE

UPON REPRESENTATIONS OF THE TRUSTEE, OR OTHER INTERESTED PARTIES, THE COURT FINDS THAT:

The above named debtor has pending in this Court a case for adjustment of debts by an individual with regular income under the provisions of Chapter 13 of Title 11 U.S.C. and pursuant to the provisions of said statute and of the debtor's plan, the debtor has submitted all of such portion of the debtor's future earnings or other future income to the supervision and control of the trustee of this Court as may be necessary for the execution of the debtor's plan; and

That under the provisions of Title 11 U.S.C., this Court has exclusive jurisdiction of all property including the earnings from such services performed by the debtor during the pendency of this case pursuant to 11 U.S.C. § 1325(b) any entity from whom the debtor receives income shall pay all or any part of such income to the trustee as may be ordered by this Court. A portion of the debtor's earnings are necessary for the execution of the debtor's plan.

NOW, THEREFORE, IT IS ORDERED that until further order of this Court or until notice that this case has been dismissed or converted to Chapter 7 of the Bankruptcy Code is received, the employer of said debtor

Mattress Firm, INC 5815 Gulf Freeway Houston, TX 77023

shall deduct from the earnings of the debtor the sum of	\$138.47 bi-weekly	
beginning on the next payday following the receipt of this order and deduct a similar amount for each pay period thereafter, including an period for which the debtor receives periodic or lump sum payment for or on account of vacation, termination or other benefits arising out of present or past employment of the debtor. Employer shall remit forthwith the sums so deducted to the trustee appointed here or his successor in interest as follows:		
Glenn B. Stearns PO Box 2368 Memphis TN 38101-2368		
IT IS FURTHER ORDERED, that said employer notify said for such termination.	trustee if the employment of said debtor is terminated and the reason	
provisions of any laws of the United States, the laws of any state	of the debtor, except the amounts required to be withheld by the or political subdivision, or by an insurance pension or union dues this Court be paid to the aforesaid debtor in accordance with employer's	
IT IS FURTHER ORDERED, that no deductions for account not specifically authorized by this Court be made from the earning	nt of any garnishment, wage assignment, credit union or other purpose ags of the debtor.	
IT IS FURTHER ORDERED, that this order supersedes ar cause.	ny and all previous orders, if any, made to the subject employer in this	
Date		

United States Bankruptcy Judge